

STUDENT AID AND EXPENSE WORKSHEET

Use of this documentation worksheet is optional.

Name	SSN	# of Months Budgeted	Semester
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Total Student Aid Received \$ _____

Total Allowable Expenses \$ _____

Total Work Study Contract \$ _____

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1. Enter Total Student Aid \$ _____
 2. Enter Total Expenses (-) \$ _____
 3. Subtract Line 2 from Line 1 (=) \$ _____
 4. Prorate line 3 by the number of months budgeted.
Add to Food Stamp Worksheet line 8. Budget as
Unearned income. If line 3 is less than zero, change
the number to a positive and enter it on line 5. \$ _____
 5. Remaining Expenses -- If s/he doesn't have work
study income, worksheet is complete. \$ _____
 6. Enter Work Study Income \$ _____
 7. Enter Line 5 Remaining Expenses, if any (-) \$ _____
 8. Line 6 – Line 7 = Income (=) \$ _____
 9. Prorate line 8 by the number of months budgeted.
Add to Food Stamp Worksheet, line 5. Budget as
earned income. \$ _____

Student Grants and Loans Worksheet Documentation

Use of this documentation worksheet is optional.

Name	SSN	# of Months Budgeted	Semester
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INCOME

Source of Student Aid	Total Awarded	Date Disbursed	Amount Disbursed	Intended Period of Coverage	Verification Source	Date Verified
Total Income	\$		\$			

EXPENSES

Expense	Amount	Verification Document	Date	NOTES
Tuition				
Orientation Fees				
Guarantee Fees				
Insurance on Loans				
Uniforms				
Lab Fees				
Equipment				
Books				
Transportation				
Miscellaneous				
Child Care*				
Shelter*				
Total Expenses	\$			

* NOT ALLOWABLE EXCLUSION FROM STUDENT GRANT AND LOAN INCOME